

REMARKS

Favorable reconsideration of this application as presently amended and in light of the following discussion is respectfully requested.

Claims 2-26 are pending in this application, Claim 7 having been presently amended, and Claims 9-24 having been previously withdrawn. Support for amended Claim 7 can be found, for example, in the original claims, drawings, and specification as originally filed. No new matter has been added.

In the outstanding Office Action, the claims were objected to due to informalities; Claims 2-4 and 7-8 were rejected under 35 U.S.C. § 102(b) as anticipated by Gordon (U.S. Patent No. 5,364,408); Claims 25 and 26 were rejected under 35 U.S.C. § 103(a) as unpatentable over Gordon; and Claims 5 and 6 were rejected under 35 U.S.C. § 103(a) as unpatentable over Gordon in view of Kortenbach (U.S. Patent No. 6,096,051).

In response to the objection to Claim 7, Applicants have amended Claim 7 in accordance with the suggestion set forth in the outstanding Office Action. Accordingly, Applicants respectfully submit that the objection to Claim 7 has been overcome.

In response to the rejection of Claims 2-4 and 7-8 under 35 U.S.C. § 102(b) as anticipated by Gordon, Applicants respectfully request reconsideration of the rejection and traverse the rejection as discussed next.

Independent Claim 2 is directed to an organism tissue suturing apparatus including, *inter alia*:

...a body part, with a predetermined length, having a rotary portion and can be inserted into said tissue of said organism from said hole; two hollow needle members accommodated in a portion, inside said body part, rearward from said rotary portion; a needle member operation portion for advancing said two hollow needle members toward said rotary portion from a side surface of said body part; and two openings disposed at a rear portion of said body part and communicating with an inside of said two hollow needle members,

wherein said rotary portion has two needle member receiving portions for receiving a distal end of one of said hollow needle members and that of the other of said hollow needle members respectively pressed out of said body part; and a connection duct communicating with said two needle member receiving portions; and

a duct for a suturing thread is formed in a range from one of said two openings to the other of said openings through an inside of one of said two hollow needle members, said connection duct, and an inside of the other of said two hollow needle members, when said two needle member receiving portions receive said hollow needle members respectively at a same time.

Gordon describes a device 2 which incorporates a length of standard suture material 4 with a needle 6 on each end. The needles 6 are held by a needle carrier 8 and loaded into two guiding tracks 10. The guiding tracks 10, containing the needle carriers 8 and needles 6, are deployable outside a housing 12 of the device 2 to allow the suture material 4 to be placed outside the limits of a puncture wound 14. The needles 6 are driven into a catch mechanism 16.<sup>1</sup>

However, Gordon fails to disclose or suggest “a duct for a suturing thread is formed in a range from one of said two openings to the other of said openings through an inside of one of said two hollow needle members, said connection duct, and an inside of the other of said two hollow needle members, when said two needle member receiving portions receive said hollow needle members respectively at a same time,” as recited in Applicants’ independent Claim 2.

Page 3 of the outstanding Office Action contends that the proximal end of the guiding tracks 10 corresponds to Applicants’ claimed “two openings disposed at a rear portion of said body part and communicating with an inside of said two hollow needle members.” Page 3 of

---

<sup>1</sup> See Gordon at column 6, lines 48-65.

the Office Action also contends that housing 12 in Gordon corresponds to Applicants' claimed "connection duct."

However, in Gordon, *a duct* for a suturing thread is not formed *in a range from one of two openings in the rear portion of the device to the other of the two openings* through an inside of one of the two guiding tracks 10, the housing 12, and an inside of the other of the two guiding tracks 10. In Figures 1C and 1D of Gordon, it is clear that the opening of the left guiding track 10 and the opening of the right guiding track 10 are never in contact as to form a duct, which connects one of the two openings at the rear portion of a body part, through one of the two hollow needle members, through the connection duct, and through the other of the two hollow needle members. Also, Figures 1C and 1D, nor any other figures of Gordon, do not show the ends of guiding tracks 10 connecting with the ends of housing 12 forming a duct. Thus, Gordon does not disclose or suggest Applicants' claimed "duct for a suturing thread."

Gordon also fails to disclose or suggest "two hollow needle members accommodated in a portion, inside said body part, rearward from said rotary portion; a needle member operation portion for advancing said two hollow needle members toward said rotary portion from a side surface of said body part; and two openings disposed at a rear portion of said body part and communicating with an inside of said two hollow needle members," as recited in Applicants' independent Claim 2.

Gordon describes that the guiding tracks 10, containing the needle carriers 8 and needles 6, are deployable outside a housing 12 of a the device 2 to allow the suture material 4 to placed outside the limits of a puncture wound 14. However, the guiding tracks 10 in Gordon are *not contained inside* the body part of the suturing apparatus. In contrast, Figures 1C and 1D of Gordon show the guiding tracks 10 *outside* of the device 2.

Further, Gordon fails to disclose or suggest “said rotary portion has two needle member receiving portions for receiving a distal end of one of said hollow needle members and that of the other of said hollow needle members respectively pressed out of said body part; and a connection duct communicating with said two needle member receiving portions,” as recited in independent Claim 2.

As mentioned above, Gordon, does not show the ends of the guiding tracks 10 connecting with the ends of housing 12 as to form a duct. Thus, Gordon does not describe *a connection duct communicating with said two needle member receiving portions*.

Lastly, Gordon fails to disclose or suggest “two openings disposed at a rear portion of said body part and communicating with an inside of said two hollow needle members.” Page 3 of the outstanding Office Action contends that the proximal end of guiding track 10 corresponds to Applicants’ “two openings disposed at a rear portion of said body part.” However, as seen in Figures 1A and 1B of Gordon, the distal end of the guiding track 10 is not at the *rear portion* of device 2, but rather at the *front* portion of device 2.

Furthermore, the endoscopic suture system of Gordon must use curved needle carriers 84a and 84b. The curved needle carriers 84a and 84b must pierce an organism tissue with needles 88a, 88b. The piercing operation described in Gordon is not easy to perform.

In the organism tissue suturing apparatus of Applicants’ Claim 2, it is possible to perform piercing of the organism tissue with the hollow needle members by pressing the operation portion forward (e.g. in a short stroke) so that the hollow needle members disposed slightly outside the organism tissue are accommodated respectively in the needle member receiving portions of the rotary portion disposed slightly inside the organism tissue. Thus, the suturing operation can be performed easily. Further, in one implementation of Claim 2 suturing thread can be inserted into the duct from one end of the suturing apparatus and exiting from the other end of the suturing apparatus. Therefore, it is possible in this

implementation to confirm that the suturing operation is being performed from outside the patient.

Accordingly, for all the reasons discussed above with regard to the deficiencies in Gordon, Applicants respectfully submit that independent Claim 2 (and all claims depending thereon) patentably distinguishes over Gordon.

Independent Claim 25 recites “passing a suturing thread from a proximal end of the first hollow needle member through the first needle member receiving portion, a duct in the rotary portion, the second needle member receiving portion, and the second hollow needle member, to a proximal end of the second hollow needle member,” and is believed to be patentable for at least the reasons discussed above.

Accordingly, Applicants respectfully request the rejection of Claims 25 and 26 under 35 U.S.C. § 103(a) as unpatentable over Gordon, be withdrawn.

In response to the rejection of Claims 5-6 under 35 U.S.C. § 103(a) as unpatentable over Gordon in view of Kortenbach, Applicants note that Claims 5 and 6 are dependent on independent Claim 2, and are thus believed to be patentable for at least the reasons discussed above. Further, Applicants respectfully submit that Kortenbach fails to cure any of the above-noted deficiencies of Gordon.

Accordingly, Applicants respectfully request the rejection of Claims 5-6 under 35 U.S.C. § 103(a) as unpatentable over Gordon in view of Kortenbach be withdrawn.

Consequently, in view of the present amendment, and in light of the above discussion, the pending claims as presented herewith are believed to be in condition for formal allowance, and an early and favorable action to that effect is respectfully requested.

Respectfully submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

Customer Number  
**22850**

Tel: (703) 413-3000  
Fax: (703) 413-2220  
(OSMMN 06/04)

  
Richard D. Kelly  
Attorney of Record  
Registration No. 27,757

Ronald A. Rudder, Ph.D.  
Registration No. 45,618

I:\ATTY\DPB\26's\260364US\260364US-AM.DOC